





Parent/Guardian Signature

Wilkes-Barre Family YMCA POWER SCHOLARS ACADEMY™ Enrollment Application

Wilkes-Barre Area School District

Return Application by May 21st to Address on Back

The YMCA Power Scholars Academy™ is open to current students in PreK enrolled in Kindergarten at Wilkes-Barre Area School District, 1st, 2nd, 3rd, and 4th grades. Please <u>complete</u> the following information for each child you are applying for enrollment in the program. Incomplete applications will not be processed. Thank you!

Scholar's Home Phone: Scholar's Home/Mailing Address: _ Scholar#2 Name:	elect one): 🗆 PreK-		M F	• •	olication Date
Grade completed by June 2020 (S Scholar's Home Phone: Scholar's Home/Mailing Address: _ Scholar#2 Name:	elect one): 🗆 PreK-		M F		
Scholar's Home Phone: Scholar's Home/Mailing Address: _ Scholar#2 Name:	•				
Scholar's Home/Mailing Address: _ Scholar#2 Name:	((
Scholar#2 Name:			Other pho	one:	
(<u>Please Print</u>) Last	First	Middle		Арр	lication Date
Date of Birth: (mm/dd/yyyy)	//	Gender: (circle one)	M F		
Grade completed by June 2020 (S	elect one): 🗆 PreK-	$4 \square K \square 1^{st} \square 2^{nd} \square 3^{rd} \square 4^{th}$	Current School:		
Scholar's Home Phone:	Cell Ph	none:	Other pho	ne:	
Scholar's Home/Mailing Address: _					
Scholar#3 Name:					
(<u>Please Print</u>) Last	First	Middle		Арр	lication Date
Date of Birth: (mm/dd/yyyy)	//	Gender: (circle one)	M F		
Grade completed by June 2020 (S	elect one): \square PreK-	$4 \square K \square 1^{st} \square 2^{nd} \square 3^{rd} \square 4^{th}$	Current School:		
Scholar's Home Phone:					
Scholar's Home/Mailing Address:					
Custodial Parent/Guardian	#1 :				
(Please Print)	First Nar		Last Name		t Date of Birth
Relationship to Scholar:		Emergency contact/Allow	ed to Pick-up? Yes	s No_	
Home Address:					
Home Phone:	Cell Ph	none:	Other pl	none:	
Email Address:				_	
Parent/Guardian #2:					
(Please Print)	First Nar		Last Name		t Date of Birth
Relationship to Scholar:		Emergency contact/Allow	ea to Pick-up? Yes	5 NO_	
Home Address:					
Home Phone:			Other pl	none:	
Email Address:					
Additional	Relationship		Cell/O	ther Phone	Allowed to Pick
Emergency Contacts	to Child	Address			up?
First & Last Name					
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Child Release : I give the YMCA p this information must be submitte					

Date

Clarining from work before deductions Alimony Social Security, SSI, V No Note of Control	Family Members Name			bers of your h						
Secondary Language Spoken at Home:				Welfare, Child Support, Alimony				NO	_	
1.	EXAMPLE: JANE SMITH	· · · · · · · · · · · · · · · · · · ·	\$1	0.00/Twice a			thly	11101	,,, <u>,,</u>	
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Before school care: No Yes Where: Hours there: Hours the										
Ethnicity Information: Please check one group that your child/children most identify with: □ Caucasian/White □ Caucasian/White □ Caucasian/White □ Caucasian/White □ Ispanish □ Chier, please specify □ Other, please specify □ Native Hawaiian, Pacific Islander or other □ Native Hawaiian, Pacific Islander or other □ Two or More Pecial Services: Please indicate which one of your children are: Is your child eligible for ELL services? Does your child participate in ELL services? Does your child have an IEP? Does your child have an IEP? Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance? Yes No □ Does your child swim without a lifejacket or adult assistance?	s your child currently en	rolled in?			•		#1	#2	#3	
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Hispanic/Latino Native Hawaiian, Pacific Islander or other Asian Two or More	Please check one gr most identify with: Caucasian/White	oup that your child	l/children	□ E □ S	nglish Spanish		at Home:			
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Did you participate in Power Scholars Academy in 2019? Yes No If Yes, please respond to the following questions:

Did your student's attendance at school this year:	a) improve	b) stay the same	c) get worse
Did your student's math skills at school this year:	a) improve	b) stay the same	c) get worse
Did your student's reading skills at school this year	r: a) improve	b) stay the same	c) get worse
Please comment on any impact you believe Power	Scholars has ha	d on your child academi	cally or otherwise at school?

Enrollment Paragraph: Please tell us, in 3 -4 sentences, why your child/children, would benefit from participating in the YMCA's Power Scholars Academy this summer? Does he/she have any special talents or interests? Any special needs or things that they need to improve? (This question is not optional – it is a very important part of this application.)

Attendance Pledge: Attendance at Power Scholars Academy is very important. Your child/children will not enjoy the benefits and gains expected if they do not attend on a regular basis. Please sign below to indicate your understanding of this requirement.

I understand that attendance in the YMCA POWER SCHOLARS ACADEMY™ is very important for my child/children. I pledge that if my child/children are accepted that I will make sure that she/he/they attend on a regular basis.

Parent/Guardian name

SEE NEXT PAGE FOR ADDRESS TO RETURN APPLICATION

Hurry! Don't miss out - Space is limited and applications will be processed as they arrive. If the program over-enrolls priority will be given to students with the greatest academic need. Acceptance letters will be mailed in mid-May. Program provision and student participation is dependent on program funding.

Additional applications are available on the YMCA website. www.wbymca.org/power-scholars or inquire at your school's office.

Submit completed applications no later than Thursday, May 21stth, 2020. Mail OR drop off at the YMCA.

Jennifer Brennan, PSA YMCA Coordinator Wilkes-Barre Family YMCA 40 West Northampton Street Wilkes-Barre, PA 18701

PLEASE DO NOT RETURN APPLICATIONS TO YOUR CHILD'S TEACHER OR SCHOOL. MAKE SURE ALL QUESTIONS ARE ANSWERED. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.